

**Illinois Department of Healthcare and Family Services
Breast Cancer Quality Screening and Treatment Advisory Board Meeting**

December 16, 2011

Members Present

Cathy Galligan (Representing Adrienne White)
Doris Garrett (Representing Linda Maricle)
Eileen Knightly
Terry Macarol
Dr. Elizabeth Marcus
Anne Marie Murphy, PhD
Ruth Ovunwo (Representing Salim Al Nurridin)
Janis Sayer (Representing Dr. Bechara Choucair)
Vicki Vaughn

HFS Staff

Julie Hamos, Director
Sharron Matthews, Assistant Director
Robyn Nardone
Tracy Anderson

IDPH Staff

Teresa Garate, Assistant Director
Jean Becker
Shannon Lightner

Members Absent

Dr. David Ansell
Stephanie Huston Cox
Dr. Gary Dunnington
Pamela Ganschow
Dr. Paula Grabler
Sister Sheila Lyne
Elizabeth Patton, S.A.
Dr. Melissa Simon
Donna Thompson
Ruth Todd

Interested Parties

Azmina Lakhani

Sharron Matthews called the meeting to order and welcomed attendees.

Attendees via videoconference in Springfield and Chicago introduced themselves followed by those on the phone.

Minutes from the August 12, 2011 meeting were reviewed. Minutes were approved and adopted.

It was noted that this was the last meeting for the current board members.

Updates on Patient Navigation Pilots and Third Party Evaluation

Sharron Matthews advised that the initial paperwork for the Patient Navigation Pilots, the Third Party Evaluators and the Quality Improvement Program had been completed. HFS is awaiting final approval from the Governor's Office of Management and Budget for 3 of the 4 requests.

Updates on Quality Improvement Program (QIP) for Providers

Sharron Matthews reviewed that the original breast cancer legislation called for:

- Bonus payments for PCPs who meet a standard for screening mammograms (\$25 per patient qualifying at 51% of panel)
- Increasing the Medicaid mammography rates to Medicare rates
- Issuing 15% bonus payments to eligible providers who meet quality standards to be by the Advisory Board

Sharron Matthews advised that the legislative amendment that passed both chambers removes the 15% bonus payments and ties the increased Medicare rates provider participation in the Quality Improvement Program. The Governor plans to sign the amendment today, December 16th.

It is anticipated that the implementation planning for the QIP will begin in January 2012.

Director Hamos indicated that the first step will be to send out the cover letter and provider agreement to the current 1,400 Medicaid service providers. It was noted that the grant agreement with the Task Force needs to be signed prior to sending out the provider agreement and cover letter about the QIP. This is expected to happen by February 2012.

Anne Marie Murphy will send her comments on the cover letter and provider agreement to HFS for review. It was suggested and agreed to change the cover letter to request that the capacity survey be returned in 30 days, not 60 days.

Shannon Lightner discussed that there will be potential cuts to the Medicare rates in early 2012. This happens regularly, and then adjustments are made. She suggested that we wait until Congress makes the adjustments to the higher levels before sending out information citing rate increases.

Jean Becker indicated that it needed to be clarified in the letter that the rate increases would be based on the IBCCP reimburses mammography services rates which are for the Chicago area. Rates differ depending on location in the state.

In regards to the mammography services eligible for rate increase, it was decided not to include CPT 77052 given that it is an exam not an actual screening and is not done for all patients. Also the description of CPT codes 77055 and 77056 need to be clarified. Jean Becker will send the information to Tracy Anderson.

Data

According to HFS claims data, the number of digital mammography services performed increased from 2009 to 2010. This is a positive trend as digital mammography produces a higher quality image.

Anne Marie Murphy stated that the Task Force data showed that in the second year treatment was better. However, the quality of mammography was not as good.

Terry Macarol discussed that there is a learning curve for the individuals collecting the data which should improve over time.

The programs will capture operations and clinical data which will be a good blend.

Theresa Garate questioned if an evaluator had been identified for the Patient Navigation Pilots component. Sharron Matthews advised that Northwestern University had been selected as the Third Party Evaluator. Dr. Melissa Simon and Dr. Joseph Feinglass will be heading the component. Designing of the evaluation process will begin early in 2012.

Terry Macarol suggested that the provider agreement and cover letter language be changed. It needs to be clear that the data will be shared with the Task Force/Consortium, and that the agreement is outside of the Patient Safety Organization regulations and program which most hospitals in Chicago participate in now.

HFS will take out of the cover letter that the data will be held as confidential and take out of the provider agreement the language regarding signing a data sharing agreement.

Eileen Knightly suggested that Anne Marie Murphy notify providers participating with the Task Force that the state initiative is different from theirs.

Review of the First Year

Director Hamos thanked members for their participation. The board has had a very productive year and many things have been learned. She indicated that the initial 12 month commitment requested of board members had now been fulfilled. And, that because of their leadership, guidance and participation, the IBCQSTI was now ready to be implemented.

The issue of whether there is still a need for the advisory board was discussed. Now that the initiative was going to be implemented, what would meetings focus on besides periodic reports on the different components?

Shannon Lightner announced that she will be presenting on the board's initiative to the CDC so there would be continued interest in what happens next year.

Anne Marie Murphy suggested that the group could address other issues that impact Breast cancer screening and treatment, such as standing orders.

Terry Macarol questioned if there is no order from a physician, where is the report sent to if it is abnormal? Obviously, this is a horrible gap in process. Protocols and procedures need examining also.

Sharron Matthews suggested that the board meetings could be used to discuss other issues related to women's breast health. It was also suggested that the group could host forums to get other experts involved in addressing topics impacting breast cancer.

Shannon Lightner suggested that the board needs to expand its members into other parts of the state.

Sharron Matthews indicated now that there will be actual program activities being implemented that there might be more interest. She requested that Vickie Vaughn assist in increasing downstate participation on the board. All board members were then asked to think about recommendations for the next meeting.

Robyn Nardone offered that having representatives from different areas, such as, radiologists, physicians, etc. would make board discussions more productive.

Given this discussion, the board agreed to request continuation for another year.

Sharron Matthews suggested and it was agreed that the group now only needed to meet quarterly. This would provide enough time for the planning and conducting of activities to report on. The first meeting in 2012 will be scheduled for March and will focus on future agendas and issues that need to be discussed and development of a calendar of meeting and activities.

Director Hamos stated that the Department would be asking for another 1 year commitment from 2012 board members.

Anne Marie Murphy stated that she hoped to have a kick-off press conference for the QIP and that it would most likely be late fall before the first data results would be available.

Terry Macarol emphasized that outreach is so important to the success of the Patient Navigation Pilots and their evaluation as well as for the Quality Improvement Program for providers.

Robyn Nardone pointed out that the HFS breast cancer screening alert went to 358,000 female participants ages 40-64 in 2010. In addition, over 600 information packets were mailed to churches and community group. Also Director Hamos and Assistant Director Matthews continue to be engaged as speakers for breast cancer support groups. Intense and targeted outreach activities are being planned now for the implementation of the Patient Navigation Pilots and the Quality Improvement Program for providers.

Shannon Lightner added that it would be interesting to see what other states are doing and what their screening rates are.

Board members were reminded that the ethics training form needs to be signed and returned ASAP. Dr. Marcus requested that the form be re-sent to her.

Director Hamos stated that the Department would be asking for another 1 year commitment from 2012 board members.

Meeting was adjourned.